

County: Walworth
 WILLIAMS BAY CARE CENTER
 146 CLOVER STREET

Facility ID: 8180

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WILLIAMS BAY 53191 Phone: (262) 245-6400
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 71
 Total Licensed Bed Capacity (12/31/01): 82
 Number of Residents on 12/31/01: 52

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 52

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		44.2
Supp. Home Care-Personal Care	No					1 - 4 Years		28.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.7	More Than 4 Years		26.9
Day Services	No	Mental Illness (Org./Psy)	23.1	65 - 74	5.8			-----
Respite Care	Yes	Mental Illness (Other)	9.6	75 - 84	30.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	3.8		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	5.8	65 & Over	92.3	-----		
Transportation	No	Cerebrovascular	9.6		-----	RNs		12.1
Referral Service	Yes	Diabetes	21.2	Sex	%	LPNs		3.1
Other Services	No	Respiratory	3.8		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	23.1	Male	23.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	76.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	5	100.0	272	31	79.5	108	0	0.0	0	6	75.0	148	0	0.0	0	0	0.0	42	80.8
Intermediate	---	---	---	8	20.5	90	0	0.0	0	2	25.0	148	0	0.0	0	0	0.0	10	19.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	5	100.0		39	100.0		0	0.0		8	100.0		0	0.0		0	0.0	52	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	12.6	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.8	Bathing	0.0	80.8	19.2	52
Other Nursing Homes	1.7	Dressing	19.2	61.5	19.2	52
Acute Care Hospitals	79.0	Transferring	28.8	44.2	26.9	52
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	30.8	46.2	23.1	52
Rehabilitation Hospitals	2.5	Eating	88.5	3.8	7.7	52
Other Locations	3.4	*****				
Total Number of Admissions	119	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	1.9	Receiving Respiratory Care		0.0
Private Home/No Home Health	31.5	Occ/Freq. Incontinent of Bladder	53.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	12.9	Occ/Freq. Incontinent of Bowel	55.8	Receiving Suctioning		0.0
Other Nursing Homes	3.2			Receiving Ostomy Care		0.0
Acute Care Hospitals	25.8	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		30.8
Rehabilitation Hospitals	0.8					
Other Locations	7.3	Skin Care		Other Resident Characteristics		
Deaths	18.5	With Pressure Sores	5.8	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	124			Receiving Psychoactive Drugs		71.2

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	63.0	82.5	0.76	86.4	0.73	85.8	0.73	84.6	0.75
Current Residents from In-County	73.1	74.3	0.98	69.6	1.05	69.4	1.05	77.0	0.95
Admissions from In-County, Still Residing	15.1	19.8	0.76	19.9	0.76	23.1	0.65	20.8	0.73
Admissions/Average Daily Census	228.8	148.2	1.54	133.4	1.72	105.6	2.17	128.9	1.78
Discharges/Average Daily Census	238.5	146.6	1.63	132.0	1.81	105.9	2.25	130.0	1.83
Discharges To Private Residence/Average Daily Census	105.8	58.2	1.82	49.7	2.13	38.5	2.75	52.8	2.00
Residents Receiving Skilled Care	80.8	92.6	0.87	90.0	0.90	89.9	0.90	85.3	0.95
Residents Aged 65 and Older	92.3	95.1	0.97	94.7	0.98	93.3	0.99	87.5	1.06
Title 19 (Medicaid) Funded Residents	75.0	66.0	1.14	68.8	1.09	69.9	1.07	68.7	1.09
Private Pay Funded Residents	15.4	22.2	0.69	23.6	0.65	22.2	0.69	22.0	0.70
Developmentally Disabled Residents	0.0	0.8	0.00	1.0	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	32.7	31.4	1.04	36.3	0.90	38.5	0.85	33.8	0.97
General Medical Service Residents	23.1	23.8	0.97	21.1	1.09	21.2	1.09	19.4	1.19
Impaired ADL (Mean)	43.1	46.9	0.92	47.1	0.91	46.4	0.93	49.3	0.87
Psychological Problems	71.2	47.2	1.51	49.5	1.44	52.6	1.35	51.9	1.37
Nursing Care Required (Mean)	4.6	6.7	0.69	6.7	0.68	7.4	0.61	7.3	0.62